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22827 7590 12/17/2004

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03/03/2005 MWOLDGE2 00000094 10643387

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Pamela Knorr	(Depositor's name)
<i>Pamela Knorr</i>	(Signature)
February 28, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/643,387	08/19/2003	Joey K. Underwood	JPS-30-CIP-CON3	3627

TITLE OF INVENTION: WATER RESISTANT PROTECTIVE GARMENT FOR FIRE FIGHTERS

Repln. Ref: 03/03/2005 MWOLDGE2 0021535400
DAH:041403 Name/Number:10643387

FC: 9204	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	NO	\$1400	\$300	\$1700	03/17/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
WELCH, GARY L	3765	002-458000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Dority & Manning, P.A.
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Safety Components Fabric Technologies, Inc. Greenville, South Carolina 29605

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1403 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Timothy A. Cassidy

Date 2/28/05

Typed or printed name Timothy A. Cassidy

Registration No. 38,024

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